

Reception

Notificaitons

| ◀ April 16 ▶ | | | | | | |
|--------------|----|----|----|----|----|----|
| M | T | W | T | F | S | S |
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | |

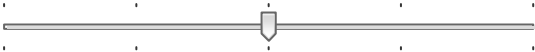
ID of patient

Existing Patient

New Patient

Details of patient
Name
ID
ect.

Priority Level



☒ OPD

☐ IPD

| Select Doctor |
|---------------|
| No doctor |
| Doctor 1 |
| Doctor 2 |

| Lab schedul |
|-------------|
| No Lab |
| Lab 1 |
| Lab 2 |

| Select Doctor |
|---------------|
| No doctor |
| Doctor 1 |
| Doctor 2 |

| Lab schedul |
|-------------|
| No Lab |
| Lab 1 |
| Lab 2 |

| Lab techneesient |
|------------------|
| no |
| Tech 1 |
| Tech 2 |

| Accomedation |
|--------------|
| Block A |
| Block B |
| Block C |

| Lab techneesient |
|------------------|
| no |
| Tech 1 |
| Tech 2 |

| Bed number |
|------------|
| |

Patient conditions

Submit

Cancel

New Patient

Name
ID
TP
Home address
Contacts
Contacts address
Contacts tp

Upload Photo

Create account